

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>G.H.</i>		<i>12/20/99</i>
O.I.P.E. CLASSIFIER		<i>7</i>	<i>01-04-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>1788</i>	<i>1-12-00</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	6 11 10 5 9 3
29	23 17 14 4 12
01	01 02 03 04 05
3	✓ ✓ ✓ ✓ ✓
8	✓ ✓ ✓ ✓ ✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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